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(Depositor's name) PSC SCANNING, INC. - STOEL RIVES LLP C/O STOEL RIVES LLP 900 SW 5TH AVENUE PORTLAND, OR 97204 05/23/2005 BABRAHA2 00000021 134953 10762132 (Signature FC:1501 1400.00 DA 300.00 DA 02 FC:1504 FC:8001 15.00 DA CONFIRMATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE 4123 -51306/789:1 10/762,132 01/20/2004 Alexander M. McOueen TITLE OF INVENTION: METHOD AND APPARATUS TO PREVENT REPORTING MULTIPLE READS OF OPTICAL CODED ITEMS **PUBLICATION FEE** DATE DUE APPLN. TYPE SMALL ENTITY **ISSUE FEE** TOTAL FEE(S) DUE NO \$1400 \$300 \$1700 06/15/2005 nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS 2876 235-462250 HESS, DANIEL A 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list | Stoel Rives LLP (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) PSC Scanning, Inc. Eugene, Oregon ☐ Individual ☐ Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: If Acct. 13-4953 has insufficient Issue Fee A check in the amount of the fee(s) is enclosed. funds, charge Acct. No. 19-4455 Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-4953 (enclose an extra copy of this form). Advance Order - # of Copies ____5 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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